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SELSKAR MICHAEL GUNN

THE death of Selskar Gunn on August 2 has deprived the cause of public health of one of its wisest and most imaginative leaders.

He was born in London, May 25, 1883, of partly Irish ancestry which helped to color his vivid temperament. After coming to this country, he became one of "Sedgwick's boys" taking his bachelor's degree at M.I.T. in 1905 and, later, his C.P.H. at the Harvard-Technology School for Health Officers in 1917. He began his career as a bacteriologist (as did so many public health pioneers of his generation); served as Health Officer of Orange, N. J., in 1908-1910; and taught under Sedgwick at M.I.T. from 1910 to 1919, rising to the rank of Associate Professor. He held a post on the staff of the Massachusetts State Department of Public Health from 1914 to 1916.

Selskar Gunn rendered invaluable service to the American Public Health Association during the formative years of its transformation from a small group of health officers to a strong continental professional society. He was Secretary from 1912 to 1918; Managing Editor of this JOURNAL from 1912 to 1914; and Editor from 1914 to 1918.

The first World War drew Gunn into the wider international fields of public health which were to command his major interest for more than twenty years. He served with the American Tuberculosis Commission in France (and as a Captain in the Red Cross) from 1917 to 1920; as Advisor to the Ministry of Health of Czechoslovakia from 1920 to 1922; and in the Paris office of the Rockefeller Foundation from 1922 to 1932. He was placed in charge of all the health work of this organization in the European area; and was made a Vice-President of the Foundation in 1927. His intimate knowledge of problems and personalities—with the prestige of the Foundation behind it—proved of incalculable value. The writer recalls one typical instance. The position of Stampar, the splendid health leader of Yugoslavia, was threatened by a political cabal. Gunn took the Orient Express and called on the King to say how pleased the Foundation was with the magnificent progress Yugoslavia was making under Stampar's guidance. That was all; but it was enough. Stampar's good work went on.

In 1937 Gunn was sent by the Foundation to China where he remained for

the better part of five years. The plan which he developed for a broad program of social welfare—in which the artificial boundaries between health and education and agriculture and economics were broken down—was perhaps the most significant achievement of his life. When the menace of Japanese imperialism is overthrown, this program will certainly be realized as a basis for the great emergent China of the future.

Since 1941 Gunn has been at home again, primarily engaged in the direction of a comprehensive study for the National Health Council of the functions of voluntary health agencies in the United States—a study which will shortly be completed by his associate, Philip S. Platt. In 1943, he served as the Secretary of the Committee appointed by Governor Lehman to organize the work of OFRRO, evolving plans which greatly facilitated the operations of its successor, UNRRA.

Selskar Gunn, among other honors, received decorations from the governments of Czechoslovakia, Denmark, France, Norway, Poland, and Yugoslavia. The fruits of his efforts in many parts of the world and the love of his friends meant more to him than any merely tangible rewards. His courage and loyalty, his wisdom and statesmanship, his driving conscience, his warm and eager and intensely human personality made him very dear to us. With him, we think always of the wife (Carroll McComas) whom he married in 1933 and who did so much during the past ten years to make his life happy and fruitful.

WHAT PRICE, THE SCHOOL HEALTH EXAMINATION?

THE routine machinery of the school health examination is now once more in active operation, throughout the country. It is one of the largest, and one of the most costly, enterprises in the field of community health. We may properly ask ourselves whether the machine in our home communities is geared to a reasonable maximum of efficiency, whether it is turning out the results which we have a right to demand. Justly or unjustly, the high incidence of various physical defects revealed by Selective Service examinations, will inevitably raise questions as to the success of past performances. Particularly at the present moment, the shortage of physicians for civilian service makes it imperative to use the time of precious professional personnel in the most efficient manner.

The underlying philosophy of the school health examination is sound. It envisages three procedures which are all eminently desirable:

A periodic medical examination of each child, sufficiently thorough to detect all important physical defects and deficiencies.

The actual use of this examination as a basis for the education of the child and its parents in regard to the application of the laws of health to that particular child; and for the adaptation of the school program, including physical environment, load of home work and physical exercise, to its individual needs.

The correction of those remediable defects which are discovered.

In some cities and even in some small rural communities this ideal is attained in reasonable degree. The family physician, the school physician, and the school nurse in such areas understand their job and cooperate effectively in its performance.

In other communities, the picture is a very different one. In a New York town the task of school inspection was, a few years ago, allotted in rotation to